PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT 99-01166

FLORIDA DEPARTMENT OF STATE
**Katherine Harris**
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 JUN -8 PM 12:13

DOCUMENT # P98000032304

1. Corporation Name
Training & Marketing Consulting Inc.

| Principal Place of Business | Mailing Address |
|---|---|
| 10003 N.W. 9 Street<br>Cir. #2-17<br>Miami, FL 33172 | 10003 N.W. 9 Street<br>Cir. #2-17<br>Miami, FL 33172 |

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

| 2. New Principal Office Address, If Applicable | 3. New Mailing Office Address, If Applicable |
|---|---|
| 10003 N.W 9 Street | 10003 N.W. 9 Street |
| Suite, Apt. #, etc.: Cir. #2-17 | Suite, Apt. #, etc.: Cir. #2-17 |
| City & State: Miami, FL | City & State: Miami, FL |
| Zip: 33172 Country: USA | Zip: 33172 Country: USA |

4. Date Incorporated or Qualified To Do Business in Florida: 4/08/98

5. FEI Number: 65-0841248 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Title(s) 1 | Name of Officers and/or Directors 2 | Street Address of Each Officer and/or Director 3 | City / State / Zip 4 |
|---|---|---|---|
| Pres. | Vijay Shah | 10003 NW 9 Street, Cir. #2-17 | Miami, FL 33172 |
| V.P. | Smita Shah | 10003 NW 9 Street, Cir #2-17 | Miami, FL 33172 |
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| | | | |

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****450.00 ****450.00

8. Name and Address of Current Registered Agent

Smita Shah
10003 NW 9 Street, Cir. #2-17
Miami, FL 33172

9. Name and Address of New Registered Agent

Name: Smita Shah
Street Address (P.O. Box Number is Not Acceptable): 10003 NW 9 Street
Suite, Apt. #, Etc.: Cir. #2-17
City: Miami State: FL Zip Code: 33172

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: X Smita Shah — REGISTERED AGENT MUST SIGN
Date: 6/5/01

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

**SIGNATURE:** X Smita Shah — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date: 6/5/01
Daytime Phone #

Training & Marketing Consulting Inc.
10003 NW 9th Street Circle #217
Miami, Florida 33172

Monday, June 4, 2001

Florida Department of State
Division of Corporations
Attention: Reinstatements Section
P.O. Box 6327
Tallahassee, Florida 32314

RE: Failure to file annual reports and request for reinstatement without penalties:

To whom it may concern,

I have been incorporated in the State of Florida for the past three years. During that time we have tried to comply with all the filing requirements including the timely filing of the Florida Sales Tax, Florida Intangible tax, and the Florida Corporate Income tax. When the articles of corporation were filed for my corporation, we were living at 4655 Highway East, Mariana, Fl. We have since relocated to the address listed above. Unfortunately, all of the notices sent from your office were not forwarded to my new address. At this time, my corporation has been involuntarily dissolved for failure to pay and file the Florida Annual Reports.

We are respectfully requesting the abatement of the late filing fees for reinstatement due to the fact that I did not receive the reports and was not notified by my attorney or accountant of my filing responsibilities. I am enclosing a completed application for reinstatement with a good faith payment of $450.00 (four hundred and fifty dollars) which will pay for the delinquent years of 1999, 2000, and the current year of 2001.

I apologize for any inconvenience which this request may cause. We will make sure that all future reports are filed on-time. Your sympathy and understanding in this situation will be deeply appreciated.

Sincerely,

Smita Shah

Smita Shah